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SUBJECT: BRAZIL: DATA COLLECTION OF BRAZILIAN GOVERNMENT
INTERVENTIONS RE H1N1

REF: STATE 73971

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(U) THIS CABLE IS SENSITIVE BUT UNCLASSIFIED AND NOT FOR INTERNET
DISTRIBUTION.

¶1. (SBU) In response to REFTEL post gathered the following
information regarding the Government of Brazil's (GOB) interventions
and actions aimed at dealing with the convergence of the H1N1
outbreak and the Southern Hemisphere's annual flu season.

GOVERNMENT INTERVENTIONS

¶2. (SBU) H1N1 flu has caused a considerable amount of concern
within the GOB, the state and local authorities, and among the
Brazilian population. The GOB, state, and local authorities have
not/not made any emergency declarations. The GOB has undertaken a
public education campaign focused at keeping the public calm and
reinforcing the idea that, at least in Brazil, the H1N1 flu shows no
signs of being any more severe than the yearly outbreaks of seasonal
flu. The Minister of Health has personally made several televised
appearances reassuring the public that his Ministry is monitoring
the situation closely and taken all prudent actions. This includes
increasing the government's stockpiles of Tamiflu, which is in turn
being dispensed directly by health centers, at reduced or no costs,
if they believe that the patient's situation warrants its use. The
government's increased purchasing of Tamiflu has caused most
pharmacies to run out of the medicine, which may be an intended
side-affect aimed at stopping the public from self-medicating.

¶3. (SBU) The Ministry of Health has not/not made H1N1 a notifiable
disease. The only quarantine procedures in place are in hospitals
and clinics, in which suspected or confirmed H1N1 cases are kept in
a specific quarantine wing; however in most cases these patients are
then released and asked to stay home for a week. The Embassy is
aware of one situation in which a few AmCits were kept in quarantine
for over a week. Hospitalization occurs in the minority of cases
because the severity of the disease does not warrant it.

¶4. (SBU) Some schools have closed for short periods of time (1-2
weeks) or delayed their opening after winter break in the hopes that
infected students would realize that they were infected before
returning to school and then decide to stay home rather than infect
their classmates. The American School in Brasilia suspended classes
for one week in the fifth grade only after four students in that
grade became ill with flu-like diseases. The suspension was advised
by the Ministry of Health. There have been no other closures in
theaters or other public venues.

¶5. (SBU) At this point there have been no/no staggered business
hours, mask ordinances, mandated private funerals, bans on
door-to-door sales, interventions to reduce transmission in the

workplace, or protective sequestration of children.

¶6. (SBU) While there have not/not been any governmental decisions to ban public gatherings, there have been several cases in which event organizers have chosen to postpone or cancel events out of concern over the spread of H1N1.

¶7. (SBU) There have not/not been any no-crowding rules or community-wide business closures.

¶8. (SBU) Both domestic and international airports are making public service announcements and distributing flyers describing the primary symptoms of H1N1 and asking any travelers that believe they have those symptoms to identify themselves to health officials posted in the airport. International travelers are required to complete a written health self-assessment that they present to health officials while passing through customs and immigration. Those who indicate they have symptoms are taken aside for additional screening.

¶9. (SBU) Ministry of Health statistics indicate that the majority of cases contracted abroad have been linked to Argentina. As such, the GOB has deployed army units and health officials to help patrol the southern borders with Argentina, Paraguay, and Uruguay. These officials are providing information regarding the H1N1 flu and screening travelers who appear to be ill or who self-identify as having H1N1-like symptoms.

STATE OF THE HEALTHCARE SYSTEM

¶10. (SBU) In general, the medical infrastructure in the major cities of Brazil is comparable with that in the United States. The number of H1N1 cases in Brazil has not overwhelmed the abilities of the health care system. Most patients are not being hospitalized and are being asked to rest at home until they have recovered from the virus. However, the Minister of Health has expressed some concern that the public health system in Rio de Janeiro, which is

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chronically under strain, could become overwhelmed. This possibility is increased by the large number of international travelers going to, or transiting through, Rio.

¶11. (SBU) Doctors anecdotally report that their patients are coming in for minor cold and allergy symptoms (which are exceedingly common during this time of year) fearing that they may have contracted H1N1 flu. In general, doctors are performing an initial clinical screening which eliminates the majority of suspect cases. Those that are not eliminated by this screening have an actual flu test performed to concretely diagnose their case. Generally the hospital or clinic will keep a patient isolated during the initial screening and in some cases until the results of the flu test are received. According to the Ministry of Health, between April 25 and August 22 the results of 30,854 flu tests were reported by state and local health authorities. Of these tests, 16.9% tested positive for H1N1 while 2.9% tested positive for seasonal flu. The remaining cases were negative for any type of influenza.

¶12. (SBU) As of August 22, there have been 557 deaths in Brazil attributed to H1N1 flu. According to the Ministry of Health the severity of H1N1 - based on the symptoms it causes, the severity to which the symptoms are felt, the frequency with which they appear, and the frequency with which hospitalization is required - in Brazil is statistically indistinguishable from the severity of the seasonal flu.

KUBISKE